

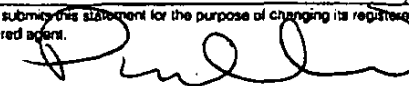
2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

02-19-2008 90019 014 ****61.25
N05000004586

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N05000004586					
1. Entity Name THE KIWANIS CLUB OF DESTIN FOUNDATION, INC.					
Principal Place of Business 40 11TH STREET #87 SHALIMAR, FL 32579 US			Mailing Address P.O. BOX 1360 DESTIN, FL 32540 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 20-2784377			Applied For Not Applicable		
5. Certificate of Status Desired ☐			5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CAMPBELL, SCOTT M CLARK, PARTINGTON, HART, LARRY, BOND 34990 EMERALD COAST PARKWAY, STE 301 DESTIN, FL 32541			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  3-16-08					
Filing Fee is \$61.25 Due by May 1, 2008					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	D	NAME	BLANKENSHIP, GAIL	TITLE	D
STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	1223 AIRPORT RD, STE. 104
CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	DESTIN, FL 32541
TITLE	D	NAME	WHIDDEN, KATHY	TITLE	D
STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	2050 KILDARE CIR.
CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	NICEVILLE, FL 32578
TITLE	D	NAME	MARTIN, PAM	TITLE	T
STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	JALENE DIXON
CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	PO BOX 1360
TITLE	P	NAME	MARTIN, PAMELA	TITLE	D
STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	DESTON, FL 32540
CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	D.S.P.P
TITLE	V	NAME	BRADLEY, KIM	TITLE	D
STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	P.O. BOX 1360	STREET ADDRESS	
CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	DESTIN, FL 32540	CITY-ST-ZIP	
TITLE	T	NAME	MORSE, JEREMY	TITLE	D
STREET ADDRESS	281 VININGS WAY BLVD #1305	STREET ADDRESS	281 VININGS WAY BLVD #1305	STREET ADDRESS	VICKI CHANCE
CITY-ST-ZIP	DESTIN, FL 32541	CITY-ST-ZIP	DESTIN, FL 32541	CITY-ST-ZIP	387 EVERGREEN CIR
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 817, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  3-16-08					

850-376-8283

KS